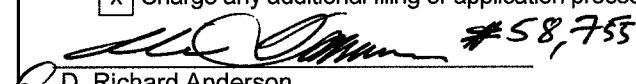


AMENDMENT TRANSMITTAL LETTER				Docket No. 2565-0296PUS1																														
Application No. 10/584,193-Conf. #1279	Filing Date February 23, 2007	Examiner B. S. Squires	Art Unit 2431																															
Applicant(s): Takehiro OHKOSHI et al.																																		
Invention: AUTHENTICATING DEVICE, AUTHENTICATED DEVICE AND KEY UPDATING METHOD																																		
<p>MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>																																		
CLAIMS AS AMENDED <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Claims Remaining After Amendment</th> <th style="width: 15%;">Highest Number Previously Paid</th> <th style="width: 15%;">Number Extra Claims Present</th> <th style="width: 15%;">Rate</th> <th style="width: 40%;"></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>6</td> <td>- 20 =</td> <td>0</td> <td>x 52.00 0.00</td> </tr> <tr> <td>Independent Claims</td> <td>4</td> <td>- 4 =</td> <td>0</td> <td>x 220.00 0.00</td> </tr> <tr> <td colspan="4">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="4">Other fee (please specify):</td> <td></td> </tr> <tr> <td colspan="4">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td>0.00</td> </tr> </tbody> </table>					Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	6	- 20 =	0	x 52.00 0.00	Independent Claims	4	- 4 =	0	x 220.00 0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					Other fee (please specify):					TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00
Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate																															
Total Claims	6	- 20 =	0	x 52.00 0.00																														
Independent Claims	4	- 4 =	0	x 220.00 0.00																														
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																		
Other fee (please specify):																																		
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00																														
<p><input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity</p> <p><input checked="" type="checkbox"/> No additional fee is required for this amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.</p>																																		
 D. Richard Anderson Dated: <u>February 18, 2009</u> Attorney Reg. No.: 40,439																																		
<p>BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8035</p>																																		